

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		6-26-00
O.I.P.E. CLASSIFIER		48	6/30/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	8/10/02
2	✓	✓	11/10/03
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	0
6	✓	✓	0
7	✓	✓	0
8	✓	✓	11
9	✓	✓	0
10	✓	✓	0
11	✓	✓	0
12	✓	✓	0
13	✓	✓	0
14	✓	✓	0
15	✓	✓	0
16	✓	✓	0
17	✓	✓	0
18	✓	✓	0
19	✓	✓	0
20	✓	✓	0
21	✓	✓	0
22	✓	✓	0
23	✓	✓	0
24	✓	✓	0
25	✓	✓	0
26	✓	✓	0
27	✓	✓	0
28	✓	✓	0
29	✓	✓	0
30	✓	✓	0
31	✓	✓	0
32	✓	✓	0
33	✓	✓	0
34	✓	✓	0
35	✓	✓	0
36	✓	✓	0
37	✓	✓	0
38	✓	✓	0
39	✓	✓	0
40	✓	✓	0
41	✓	✓	0
42	✓	✓	0
43	✓	✓	0
44	✓	✓	0
45	✓	✓	0
46	✓	✓	0
47	✓	✓	0
48	✓	✓	0
49	✓	✓	0
50	✓	✓	0

Claim	Final	Original	Date
51	✓	✓	0
52	✓	✓	0
53	✓	✓	0
54	✓	✓	0
55	✓	✓	0
56	✓	✓	0
57	✓	✓	0
58	✓	✓	0
59	✓	✓	0
60	✓	✓	0
61	✓	✓	0
62	✓	✓	0
63	✓	✓	0
64	✓	✓	0
65	✓	✓	0
66	✓	✓	0
67	✓	✓	0
68	✓	✓	0
69	✓	✓	0
70	✓	✓	0
71	✓	✓	0
72	✓	✓	0
73	✓	✓	0
74	✓	✓	0
75	✓	✓	0
76	✓	✓	0
77	✓	✓	0
78	✓	✓	0
79	✓	✓	0
80	✓	✓	0
81	✓	✓	0
82	✓	✓	0
83	✓	✓	0
84	✓	✓	0
85	✓	✓	0
86	✓	✓	0
87	✓	✓	0
88	✓	✓	0
89	✓	✓	0
90	✓	✓	0
91	✓	✓	0
92	✓	✓	0
93	✓	✓	0
94	✓	✓	0
95	✓	✓	0
96	✓	✓	0
97	✓	✓	0
98	✓	✓	0
99	✓	✓	0
100	✓	✓	0

Claim	Final	Original	Date
101	✓	✓	0
102	✓	✓	0
103	✓	✓	0
104	✓	✓	0
105	✓	✓	0
106	✓	✓	0
107	✓	✓	0
108	✓	✓	0
109	✓	✓	0
110	✓	✓	0
111	✓	✓	0
112	✓	✓	0
113	✓	✓	0
114	✓	✓	0
115	✓	✓	0
116	✓	✓	0
117	✓	✓	0
118	✓	✓	0
119	✓	✓	0
120	✓	✓	0
121	✓	✓	0
122	✓	✓	0
123	✓	✓	0
124	✓	✓	0
125	✓	✓	0
126	✓	✓	0
127	✓	✓	0
128	✓	✓	0
129	✓	✓	0
130	✓	✓	0
131	✓	✓	0
132	✓	✓	0
133	✓	✓	0
134	✓	✓	0
135	✓	✓	0
136	✓	✓	0
137	✓	✓	0
138	✓	✓	0
139	✓	✓	0
140	✓	✓	0
141	✓	✓	0
142	✓	✓	0
143	✓	✓	0
144	✓	✓	0
145	✓	✓	0
146	✓	✓	0
147	✓	✓	0
148	✓	✓	0
149	✓	✓	0
150	✓	✓	0

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)